



The Nevada State Board of Dental Examiners

Providing information and education to Nevada's dental health care professionals and the citizens of the state of Nevada

MAJOR REVISIONS TO DENTAL LAWS PASS 2007 LEGISLATURE

Nevada State Board of Dental Examiners

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Sen. Maggie Carlton sponsored a comprehensive dental bill, SB 265, that passed the Nevada Legislature. Several members of the Board of Dental Examiners testified and actively participated in the legislative process. A major change includes the following amendment to NRS 631.240 (all other provisions remain in effect):

1) An applicant must successfully pass a clinical exam approved by the Board and the American Board of Dental Examiners (ADEX);

Currently there are over 40 states that recognize the examination approved by ADEX, the American Dental Licensing Examination (ADLEX), for initial licensure. In addition, 60% of dental graduates in the United States take this clinical exam.

Other modifications to the law include:

- Provisions giving the Board greater discretion if a dentist or dental hygienist has a temporary license and has been involved in a disciplinary action.
- Allowing the Board to adopt regulations for procedures in which the Executive Director may issue subpoenas on behalf of the Board.
- The final section of this bill provides that a person engaged in the illegal practice of dentistry is guilty of a category D felony. Included in this section is a prohibition of a dentist from practicing dentistry in a manner or place that is not permitted by NRS 631.

For more information on Senate Bill 265 visit www.leg.state.nv.us. For questions or concerns, contact the Board at (702) 486-7044 or (800) 337-3926.

Curtain Closes on NV Clinical Exam

For more than 40 years, dedicated members of the Nevada State Board of Dental Examiners have administered the Nevada Clinical Dental and Dental Hygiene Exams.

With the recent changes to state law recognizing the ADEX approved exam, we turn the page to a new era of exam administration at the Board. It is with heartfelt gratitude that we thank all of those dedicated individuals who have tirelessly committed themselves over the years to ensure the safety, competency, and quality of practitioners of dentistry and dental hygiene in Nevada.

Visit us on the web at www.nvdentalboard.org

A General Reminder to Licensees Regarding Anesthesia and Sedation

The administration of general anesthesia, conscious sedation or deep sedation requires a permit from the Board. Permit requirements do not apply to the administration of local anesthesia; nitrous oxide-oxygen analgesia, provided the delivery system contains a mechanism which guarantees that an oxygen concentration of at least 25 percent will be administered to the patient at all times during the administration of the nitrous oxide; or oral medication

that is administered to a patient, to relieve anxiety, if the medication is not given in a dosage that is sufficient to induce a controlled state of depressed consciousness.

For further explanation, the Nevada Revised Statutes defines conscious sedation as a minimally depressed level of consciousness, produced by a pharmacologic or non-pharmacologic method or a combination thereof, in which the patient retains the ability independently and continuously to maintain an airway and to respond appropriately to physical stimulation and verbal commands (NRS 631.025). New ADA Guidelines for the administration of anesthesia, and the teaching of comprehensive pain and anxiety control, were adopted by the ADA House of Delegates this year; however, those guidelines DO NOT obviate current Nevada law. Licensees are strongly encouraged to review Chapter 631 of the Nevada Revised Statutes and Nevada Administrative Code to ensure compliance with applicable anesthesia and sedation requirements.

In brief, no dentist may use conscious sedation, deep sedation, or general anesthesia for dental patients except in a facility accredited by the Joint Commission on Accreditation of Healthcare Organizations, *unless* he first obtains a conscious sedation, deep sedation, or general anesthesia permit from the Board. A separate general anesthesia permit, deep sedation, or conscious sedation permit is required for each location at which a dentist administers general anesthesia, deep sedation or conscious sedation.

There is a specific form to be submitted and fees to pay with evidence showing that

the dentist is licensed in this State, and (a) For a conscious sedation permit, the applicant must show evidence of the following:

(1) The completion of a course of study, subject to the approval of the Board, of no less than 60 hours dedicated exclusively to the administration of conscious sedation and cases of successful administration to no less than 20 patients; or

(2) The completion of a program for specialty training which is approved by the Commission on Dental Accreditation of the American Dental Association and which includes education and training in the administration of conscious sedation that is equivalent to the education and training as described in subparagraph (1) of NAC 631.2213 and completion of an Advanced Cardiac Life Support course given by the American Heart Association or, if licensed as a specialist in pediatric dentistry, completion of a Pediatric Advanced Life Support course given by the American Heart Association.

(b) For a general anesthesia permit, the applicant must show evidence of the completion of an Advanced Cardiac Life Support course given by the American Heart Association and:

(1) The completion of a program, subject to the approval of the Board, of advanced training in anesthesiology and related academic subjects beyond the level of undergraduate dental school in a training program as described in Part II of the *Guidelines for Teaching the Comprehensive Control of Pain and Anxiety in Dentistry*, published by the Council on Dental Education and available from the American Dental Association, 211 East Chicago Ave., Chicago, Illinois 60611; or

(2) The completion of a graduate program in oral and maxillofacial surgery which has been approved by the Commission on Dental Accreditation of the American Dental Association.

For more information and full listing of anesthesia policies, visit the Rules and Regulations of the Nevada State Board of Dental Examiners NAC 631.2211-631.2256 in Administration of General Anesthesia, Conscious Sedation or Deep Sedation, or call the NSBDE at (702) 486-7044 or (800) 337-3926.

A Reminder to Licensees Regarding Ownership of a Dental Practice

A person is guilty of the illegal practice of dentistry or dental hygiene if he owns or controls a dental practice, shares in the fees received by a dentist or controls or attempts to control the services offered by a dentist if the person himself is not licensed by the state of Nevada. The only exception to this law is for a surviving spouse who may share in the fees of all or part of a dentist's practice, but this is limited to no more than 2 years after the dentist's death. (NRS 631.395)

NSBE Board Meetings

Please note that meeting dates are subject to change and notice of postings are made on the NSBDE website pursuant to the Nevada Open Meeting Law. Unless noted, meetings are conducted at the NSBDE administrative offices in Las Vegas. Meetings may be video conferenced to the Nevada State Board of Medical Examiners office in Reno. A complete calendar and all meeting notices are posted online at www.nvdentalboard.org.

Board Action Information

License Number	Practitioners Name
4646	Meenakshi Patel, DMD
3747	Joseph Willardsen, DDS
4069	Matthew Welebir, DDS
2386	James Carter, DDS
3201	Hamid Ahmadi, DDS (Denial for Reinstatement of License)
3046	Harvey Chin, DMD
3724	Ilya Benjamin, DDS
3330	James Frantz, DMD
4632	Thanh Ngo, DDS
3470	Bradley Rowe, DDS
5463	Arin Lousig-Nont, DMD Carlos Bordador, DDS
S3-119	Thien Truong, DDS
880	William Dickerson, DDS
3359	Anthony LaMancusa, DMD

Copies of all board actions may be obtained by contacting the Board office at (702) 486-7044 or (800) 337-3926. Stipulation agreements adopted by the NSBDE are public documents.

The Record, The Whole Record, and Nothing But the Record...

By reference in NRS 631.3485, but pursuant to NRS 629.021, "Health care records" are defined as any reports, notes, orders, photographs, X rays or other recorded data or information whether maintained in written, electronic or other form which is received or produced by a provider of health care, or any person employed by him, and contains information relating to the medical or dental history, examination, diagnosis or treatment of the patient.

A "provider of health care" is defined as the following except as otherwise provided by specific statute: "Provider of health care" means a physician licensed pursuant to chapter 630, 630A, or 633 of NRS, **dentist**, licensed nurse, dispensing optician, optometrist, practitioner of respiratory care, registered physical therapist, podiatric physician, licensed psychologist, licensed marriage and family therapist, chiropractor, athletic trainer, doctor of Oriental medicine in any form, medical laboratory director or technician pharmacist or a licensed hospital as the employer of any such person.

According to Nevada law, a dentist must maintain and distribute the dental records of a patient in the following manner:

Retention. Each provider of health

care shall retain the health care records of his patients as part of his regularly maintained records 5 years after their receipt or production. Health care records may be retained in written form, or by microfilm or any other recognized form of size reduction, including, without limitation, microfiche, computer disc, magnetic tape and optical disc, which does not adversely affect their use for the purposes of NRS 629.061. Health care records may be created, authenticated and stored in a computer system which limits access to those records.

Inspection. Each provider of health care shall make the health care records of a patient available for physical inspection by:

- The patient or representative with written authorization from the patient;
- The personal representative with written authorization from the patient;
- Any trustee of a living trust created by a deceased patient who died before reaching the age of majority;
- An investigator for the Attorney General or a grand jury investigating an alleged violation of certain statutes; or
- Any authorized representative or investigator of a state licensing board.

The records must be made available at a place within the depository convenient for physical inspection, and inspection must be permitted at all reasonable hours and lengths of time. If the records are located outside the State, the provider shall make any records requested pursuant to this section available in this State for inspection within 10 working days after the request.

Except as otherwise provided, the provider of health care shall also furnish a copy of the records to each person described in subsection 1 who requests it and pays the actual cost of postage, if any, the costs of making the copy, not to exceed 60 cents per page for photocopies and a reasonable cost for copies of X-ray photographs and other health care records produced by similar processes.

No administrative fee or additional service fee of any kind may be charged for furnishing such a copy. For any questions or concerns regarding health care records, contact NSBDE at (702) 486-7044 or (800) 337-3926 or visit our website at www.nvdentalboard.org. Links to the Nevada Revised Statutes and Regulations are available through the board website.

Pre-Medication for Dental Treatment

Amended guidelines have been released by the American Heart Association (AHA), in conjunction with the American Dental Association, regarding the treatment of patients with certain heart conditions and pre-medication that may be required.

For decades, it was recommended that patients with certain heart conditions take antibiotics shortly before dental treatments. The AHA recently stated that most of these patients do not need short-term antibiotics as a

preventive measure before their dental treatment. Dental practitioners should have received notification from the American Dental Association about the new guidelines. It is important that you carefully read and understand the AHA recommendations.

Patients with certain congenital heart disease, artificial valves and other noted heart conditions can have complicated circumstances. These patients, and their dentist or dental hygienist, should check with the patient's cardiologist or

physician prior to a dental procedure to determine if antibiotics are appropriate. It doesn't hurt to pick up the phone. A dentist should exercise his or her independent professional judgement in applying any guideline or recommendation however, professional consensus with medical practitioners and patient informed consent are important as well.

For further questions, please contact the NSBDE (702) 486-7044 or (800) 337-3926.

What Can a Dental Assistant Do?

Dental assistants are allowed to perform certain duties, but only in the employ of, at the authorization of, and under the supervision of a licensed dentist. They include the following:

- a) Expose radiographs
- b) Retract a patient's cheek, tongue or other tissue during a dental operation.
- c) Remove the debris that normally accumulates during or after a cleaning or operation by the dentist by using mouthwash, water, compressed air or suction.
- d) Place or remove a rubber dam and accessories used for

its placement.

- e) Place and secure an orthodontic ligature.
- f) Remove sutures.
- g) Place and remove a periodontal pack.
- h) Remove excess cement from cemented restorations and orthodontic appliances. A dental assistant may not use a rotary cutting instrument to remove excess cement from cemented restorations and orthodontic appliances.
- i) Administer a topical anesthetic in any form except aerosol.
- j) Train and instruct persons in the techniques of oral hygiene and preventive procedures.
- k) Take the following type of impressions:

- 1) Those used for the preparation of diagnostic models;
- 2) Those used for the preparation of counter and opposing models;
- 3) Those used for the fabrication of temporary crowns or bridges; and
- 4) Those used for the fabrication of temporary removable appliances, provided no missing teeth are replaced by those appliances.
- l) Fabricate and place temporary crowns and bridges. This procedure must be checked and approved by the supervising dentist before dismissal of the patient from the office of the dentist.
- m) Retract gingival tissue if the retraction cord contains no medicaments that have potential systemic side effects.
- n) Remove soft plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with a rubber cup or brush and a suitable polishing agent. A licensed dentist or

dental hygienist shall determine that the teeth to be polished are free of calculus or other extraneous material.

- o) Administer a topical fluoride.
 - p) Apply pit and fissure sealant to the detention for the prevention of decay.
- This procedure must be checked and approved by the supervising dentist before the dismissal of the patient from the office of the dentist.
- q) Fit orthodontic bands and prepare teeth for orthodontic bands if the bands are cemented or bonded, or both, into the patient's mouth by the dentist who authorized the dental assistant to perform this procedure.

A dentist who is licensed in the State of Nevada may authorize a dental hygienist to supervise a dental assistant in the assistance of the hygienist's performance of one or more of the following:

- a) Expose radiographs.
- b) Retract a patient's cheek, tongue, or other tissue during a dental operation.
- c) Remove the debris that normally accumulates during or after a cleaning or operation by the dental hygienist by using mouthwash, water, compressed air or suction.
- d) Train and instruct persons in the techniques of oral hygiene and preventive procedures.
- e) Remove soft plaque and stain from exposed tooth surfaces, utilizing an appropriate rotary instrument with a rubber cup or brush and a suitable polishing agent. A licensed dentist or dental hygienist shall determine that the teeth to be polished are free of calculus or other extraneous material.
- f) Administer a topical fluoride.

A dental hygienist, who is authorized by the board to perform the services described in subsection (5) of NAC 631. 210, pertaining to those hygienists issued a Public Health endorsement by the Board, may authorize a dental assistant under his supervision to assist the hygienist in the performance of certain services.

If the duty is not specifically listed, it is not to be assumed to be authorized. All duties delegable to a dental assistant require supervision. For questions and comments regarding duties delegable to the dental assistant, contact the NSBDE (702) 486-7044 or (800) 337-3926.

